$(v_i, v_i) \in \mathbb{R}^{n \times n}$

PTO/SB/17 (10-08)

RECEIVED CENTRAL FAX CENTER

JUL 2.7 2011

Approved for use through 06/20/2010. DMB 0551-0032 U.S. Patoni and Trademerk Office; U.S. DePartment OF COMMERCE U.S. Patoni and Trademerk Office; U.S. DePartment OF COMMERCE Under the Paperwork Roduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OM9 control number				
	Complete if Known			
Effective on 12/08/2004. Food pureuent to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL		Application Number	09/109,082-Conf. #315B	
		Filing Date	July 2, 1998	
		First Named Inventor	Judith MELKI	
For FY 2009		Examiner Name	R. C. Hayes	
Applicant claims small entity status. See 37 CFR 1,27		Art Unit	1647	
TOTAL AMOUNT OF PAYMENT	(\$) 100.00	Attorney Docket No.	2121-0140P	
METHOD OF PAYMENT (check all that apply)				
Check Credit Card Money Order None Other (please identify):				
X Deposit Account Deposit Account Name: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLF				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee				
Charge any additional feo(s) or underpayments of				
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
FILING FEES SEARCH FEES EXAMINATION FEES				
Application Type Fee (9	Small Entity See (\$) Fee (Small Entity S) Fee (S) Fee (S)	Small Entity Fee (5)	Fees Paid (\$)
Utility 330			110	
Design 220		50 140	. 70	
Plant 220	110 330	165 170	85	
Reissue 330	165 540	270 650	325	
Provisional 220	110	0 , 0		t, <u> </u>
2. EXCESS CLAIM FEES		var til var er er er til		Small Entity Fee (\$) Foo (\$)
For Description	a service and the service of the ser	$\sigma_{p} = p_{\mathrm{B}} \sim \pm \omega c Mc$	196 Apr. 1965	
Each claim over 20 (including Reis				52 26 220 110
Each independent claim over 3 (inc	luding Keissues)	,		390 195
Multiple dependent claims	er a sera e e e	Fee Paid (S)	Multiple Depon	3,0
Total Claims Extra Claim -20 or HP	<u> </u>	ree Faid (3)	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for	er, If greater than 20.			
Indep Claims Extra Claim	16 Fee (5)	Fee Paid (\$)	<u> </u>	
- 3 or HP =	_ × =	-		
HP - highest number of independent claims paid for, if greater than 3.				
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Sheets or traction thereof. See		u 37 CFR 1.10(5). additional 50 or fraction the	med Fee (\$)	Foo Paid (5)
- 100 = /50 = (round up to a whole number) x				
4, OTHER FEE(S)				
Non-English Specification, \$130 fee (no small entity discount)				
Other (e.g., late filing surcharge): 1811 Certificate of correction 100.00				
SUBMITTED BY				
Signature		Registration No. 40,00	59 Telaphane	(703) 205-8000
Namo (Print/Type) MaryAnne Arms	trong		Deta	- A 2009



MAA/rw